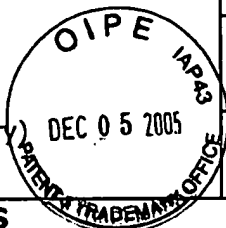


Atty. Docket No.  
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**LIST OF REFERENCES  
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(Use several sheets if necessary)



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EXAMINER INITIAL*		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE (if appropriate)
	AA						
	AB						
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	AH						
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EXAMINER

DATE CONSIDERED

12/08/05

\* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.